

**Stephens, Deborah**

**From:** Smith, Andrea  
**Sent:** Tuesday, August 07, 2007 3:29 PM  
**To:** Stephens, Deborah  
**Cc:** McAskill, Mary Louise  
**Subject:** 10/643,627

**Good Day,**

**The above application is scheduled for issuance on 8/14/07. However, it should not issue since the issue fee has not been paid. The attorney timely submitted the issue fee transmittal form (85b), but neglected to enclose a check or deposit account authorization. Since the application does not contain a general authorization, this application needs to be abandoned and the attorney needs to file a petition to revive.**

**With that said, can you please withdraw this application from issuance and change the status to indicate that this application is abandoned for failure to pay the issue fee?**

**Any assistance you can provide is greatly appreciated.**

**Thank you in advance!!!!**

**Andrea Smith**

**Petitions Examiner/Paralegal Specialist  
Office of Petitions  
(571) 272-3226 - direct dial  
(571) 273-3226 - fax**

**PATENT****IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Applicant:	Sundelin, J. et al.	)	Examiner:	Guzo, David
Serial No.:	10/643,627	)	Group Art Unit:	1636
		)	Confirmation Number :	4455
Filed:	August 19, 2003	)	Attorney Docket:	BI-06-ND6-CCC
Title:	RECOMBINANT C140 RECEPTOR, ITS AGONISTS AND ANTAGONISTS, AND NUCLEIC ACIDS ENCODING THE RECEPTOR	)		

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**SUBMISSION OF ISSUE FEE AND PUBLICATION FEE**

Box Issue Fee  
 Commissioner for Patents  
 P.O. Box 1450  
 Alexandria, VA 22313-1450

Dear Sir:

On July 11, 2007, Applicants filed form PTOL-85 (Part B - Fees Transmittal) via facsimile to the Patent and Trademark Office. A copy of the submitted form is attached herewith. Applicants' representatives intended to authorize the Director to charge the required fee(s), any deficiency, or credit any over payment, to Deposit Account Number 50-4255. However, Applicants' representatives mistakenly identified that a check was enclosed.

Pursuant to a telephone conversation between Ms. Darlene Lyon of the Office of Patent Publication and Applicant's representative Arthur Yang on July 12, 2007, Applicants hereby request that the issue fee and publication fee in the amount of \$1,700.00 be charged to Deposit Account No. 50-4255. Applicants also authorize the Director to charge any deficiency, or credit any overpayment to the same Deposit Account No.

In the event there are any questions, please do not hesitate to contact the undersigned by telephone.



JUL 12 2007 4:25PM

HOXIE & ASSOCIATES LLC

19739125236

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Respectfully submitted,

Date: JUL 12, 2007

By

Arthur Yang  
Registration No. 45,721

HOXIE & ASSOCIATES LLC  
75 Main Street  
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Millburn, NJ 07041  
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PTO/SB/21 (04-07)

Approved for use through 09/30/2007. OMB 0651-0031  
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

## TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission	4	Application Number	10/643,827
		Filing Date	August 19, 2003
		First Named Inventor	Sundelin, J.
		Art Unit	1636
		Examiner Name	Guzo, David
		Attorney Docket Number	SI-06-ND6-CCC

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached  <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s)  <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement  <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers  <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address  <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund  <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
<div style="border: 1px solid black; padding: 2px;">Remarks</div> <p>- Letter re Submission of Issue Fee and Publication Fee (2 pages)  - Copy of form PTOL-85 (per B - Fee(s) Transmittal)</p>		

### SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Hoxie & Associates LLC		
Signature			
Printed name	Arthur Yang		
Date	Jul 12, 2007	Reg. No.	45,721

### CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:

Signature			
Typed or printed name	Denise Cooper	Date	July 12, 2007

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.



Jul 12 2007 4:25PM HOXIE &amp; ASSOCIATES LLC

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## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: **Mail** Mail Stop ISSUE FEE  
**Commissioner for Patents**  
**P.O. Box 1450**  
**Alexandria, Virginia 22313-1450**  
**or Fax** (571) 273-2885

**INSTRUCTIONS:** This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate 'FEE ADDRESS' for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

50446 7590 04/11/2007

**HOXIE & TSO LLP**  
**374 MILLBURN AVENUE**  
**SUITE 300 E**  
**MILLBURN, NJ 07041**

Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

## Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

Denise Cooper	(Depositor's name)
<i>Denise Cooper</i>	(Signature)
July 11, 2007	
(Date)	

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
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10/643,627 08/19/2003 Johan Sundelin MP193-006CP1DV1ACN1DVIM 4455

**TITLE OF INVENTION:** RECOMBINANT C140 RECEPTOR, ITS AGONISTS AND ANTAGONISTS, AND NUCLEIC ACIDS ENCODING THE RECEPTOR

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$0	\$1700	07/11/2007

EXAMINER	ART UNIT	CLASS-SUBCLASS
GUZO, DAVID	1636	530-324000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363)  
 Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  
 "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list  
(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  
(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

**Hoxie & Associates LLC**  
**Thomas Hoxie**  
3 \_\_\_\_\_

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been recorded as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

## (A) NAME OF ASSIGNEE

Millennium Pharmaceuticals, Inc.

Cambridge, Massachusetts

Please check the appropriate assignee category or categories (will not be printed on the patent):  Individual  Corporation or other private group entity  Government

## 4a. The following fee(s) are submitted:

Issue Fee  
 Publication Fee (No small entity discount permitted)  
 Advance Order - # of Copies \_\_\_\_\_

## 4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)

A check is enclosed.  
 Payment by credit card. Form PTO-2038 is attached.  
 The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number \_\_\_\_\_ (enclose an extra copy of this form).

## 5. Change in Entity Status (from status indicated above)

a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.  b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant, a registered attorney or agent, or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature THOMAS HOXIEDate July 11, 2007Typed or printed name Thomas HoxieRegistration No. 32,993

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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